

PART B - FEE(S) TRANSMITTAL

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26646 7590 11/16/2009

KENYON & KENYON LLP
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|--------------------|
| (Depositor's name) |
| (Signature) |
| (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
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|------------|------------|----------------------|------------|------|
| 09/887,204 | 06/22/2001 | Moshe Fleshner-Barak | 1662/53002 | 7559 |
|------------|------------|----------------------|------------|------|

TITLE OF INVENTION: RAPIDLY EXPANDING COMPOSITION FOR GASTRIC RETENTION AND CONTROLLED RELEASE OF THERAPEUTIC AGENTS, AND DOSAGE FORMS INCLUDING THE COMPOSITION

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|---------------|---------------------|----------------------|------------------|------------|
| nonprovisional | NO | \$1510 | \$300 | \$0 | \$1810 | 02/16/2010 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|--------------------|----------|----------------|
| FUBARA, BLESSING M | 1618 | 424-488000 |

| | | |
|--|---|--|
| Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | 1 <u>Kenyon & Kenyon LLP</u> 2 _____ 3 _____ |
| <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. | | |
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Teva Pharmaceutical Industries Ltd. Petah Tiqva, Israel

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

a. The following fee(s) are submitted:

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 Publication Fee (No small entity discount permitted)
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Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Weining Wang

Date January 20, 2010

Typed or printed name Weining Wang

Registration No. 47,164

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